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Division of Corporations

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Email Address: STEVEN.DANIELS@SAUL.COM

REGISTERED AGENT CHANGE

SEVEN BRIDGES HOMEOWNE	RS ASSOCIATION, INC.	- 6 3 1
Certificate of Status	0	; ;
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Statutes, this target is submitted for a corporation organized under the laws of the State of Florida.
•	ler to change his registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: SEVEN BRIDGES HOMEOWNERS ASSOCIATION, INC.
2. The principa	I office address: 16701 Cabernet Drive, Delray Beach, FL 33446
3. The mailing	address (if different):
4. Date of incor	poration/qualification: 2/28/2014 Document number: N14000002022
	d street address of the current registered agent and registered office on file with the remember of State: (If resigned, enter resigned)
	Louis Captan
	6111 Broken Snutt Parkway NW, Suite 200
	Boca Raton, FL 33487
6. The name and (if changed):	d street address of the new registered agent (if changed) and for registered office
	Steven L. Daniels
	515 N. Flagter Drive, Suite 1400
	P.O Box NOT acceptable
	West Palm Beach, FL 33401
The street addre	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by th	sauthorized by resolution duly adopted by its board of directors or by an officer so its board, or the corporation has been notified in writing of the change.
1	of wholiteer or Juccios Printed or typed wante and side
I hereby accept I further agree is of my duties, aw document is bein corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all standes relative to the proper and complete performance of Lum familiar with and accept the obligation of the position as registered agent. Or, if this age filed merely to reflect a change in the registered office address. I hereby confirm that the been notified its writing of this change. 5. 24-2024
	nalf of an entity:
STE	USW DANIELS
Ty	ped or Printed Name

* * * FILING FEE: 535.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
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